

# Computer Emergency Response Team Incident Report

<b>Agency:</b>		<b>Date:</b>
<b>Contact Name:</b>	<b>Phone:</b>	
<b>Email:</b>	<b>Fax:</b>	

<b>Virus/Intrusion Name:</b>
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<b>Date of Incident:</b>		<b>Time of Incident:</b>	
<b>1. Describe how the intrusion was discovered, its problems, systems affected, and damages:</b>			
<b>2. Describe possible solutions for resolving the problems:</b>			
<b>3. Describe recovery methods of system, information, data, networks, etc.:</b>			
<b>4. Estimated date and time system will be available to users/customers:</b>			
<b>5. Location of Computer System:</b>			
<b>6. Is the affected system/network critical to the mission of the agency?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7. Is there evidence of spoofing?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown			
<b>8. Who is the anti-virus provider for the agency?</b>			
<b>9. List the apparent source of the intrusion/attack (IP address), if known:</b>			
<b>10. The last time the operating system was updated?</b>			
<b>11. Please check type of problems and damages that apply:</b>			
Trojan Horse	<input type="checkbox"/>	Unauthorized Root Access	<input type="checkbox"/> Network Damages
Trapdoor	<input type="checkbox"/>	Web Site Defacement	<input type="checkbox"/> Information/Data Damages
Bomb	<input type="checkbox"/>	Denial of Service	<input type="checkbox"/> Theft of Information/Data
Worm	<input type="checkbox"/>	Distributed Denial of Service	<input type="checkbox"/> Network Damages
Hoax	<input type="checkbox"/>	Operating System Damages	<input type="checkbox"/> Other, please describe:
<b>12. Suspected perpetrator or possible motivation of attack:</b>			
Insider/Disgruntled Employee	<input type="checkbox"/>	Former Employee	<input type="checkbox"/> Domestic Perpetrator
International perpetrator	<input type="checkbox"/>	Other, please describe:	
<b>13. What operating software systems were affected?</b>			
UNIX	<input type="checkbox"/>	Sun OS/Solaris	<input type="checkbox"/> OS2

LINUX	<input type="checkbox"/>	MacOS	<input type="checkbox"/>	Windows
NT	<input type="checkbox"/>	Sun OS/Solaris	<input type="checkbox"/>	Other, Please describe:
<b>14. What Hardware systems were affected?</b>				
Compaq	<input type="checkbox"/>	Packard Bell	<input type="checkbox"/>	Toshiba
Dell	<input type="checkbox"/>	Apple	<input type="checkbox"/>	Micron
HP	<input type="checkbox"/>	Gateway	<input type="checkbox"/>	PC Clone
IBM	<input type="checkbox"/>	Fujitsu	<input type="checkbox"/>	Other, please describe:
<b>15. CPU/Speed:</b>				
Pentium/90	<input type="checkbox"/>	Pentium/233	<input type="checkbox"/>	Pentium/400
Pentium/100	<input type="checkbox"/>	Pentium/300	<input type="checkbox"/>	Pentium/450
Pentium/133	<input type="checkbox"/>	Pentium/333	<input type="checkbox"/>	Motorola
Pentium/200	<input type="checkbox"/>	Pentium/350	<input type="checkbox"/>	Other, please describe:
<b>16. Memory:</b>				
16 MB	<input type="checkbox"/>	32 MB	<input type="checkbox"/>	64 MB
128 MB	<input type="checkbox"/>	Other, please describe:		
<b>17. Modem Speed:</b>				
28.8 baud	<input type="checkbox"/>	33.6 Baud	<input type="checkbox"/>	56 Baud
ISDN	<input type="checkbox"/>	Other, please describe:		
<b>18. Internet Browser:</b>				
Microsoft Internet Explorer	<input type="checkbox"/>	Netscape Navigator/Communicator	<input type="checkbox"/>	Other, please describe:
<b>19. Agency Security Infrastructure (check all that apply):</b>				
CERT Team	<input type="checkbox"/>	Security Auditing Tool(s)	<input type="checkbox"/>	Secure Remote Access Tools
Firewall(s)	<input type="checkbox"/>	Packet Filtering	<input type="checkbox"/>	Banners
Intrusion Detection System(s)	<input type="checkbox"/>	Encryption	<input type="checkbox"/>	Account/Access Control List
Other, please describe:				
<b>20. What actions and technical mitigation have been taken?</b>				
System disconnected from network	<input type="checkbox"/>	System binaries checked	<input type="checkbox"/>	No action taken
Backup of affected system(s)	<input type="checkbox"/>	Log files examined	<input type="checkbox"/>	Other, Please describe:
<b>21. Critical State services affected (check all that apply):</b>				
Health	<input type="checkbox"/>	Transportation	<input type="checkbox"/>	Criminal Justice
Public Safety	<input type="checkbox"/>	Agriculture	<input type="checkbox"/>	Education/Higher Ed.
Corrections	<input type="checkbox"/>	Labor Employment	<input type="checkbox"/>	Revenue
Environmental	<input type="checkbox"/>	Human/Social Services	<input checked="" type="checkbox"/>	Administration

<b>22. Please list other agency/organization that been informed? (Please provide names and phone numbers)</b>		
DPS	<input type="checkbox"/>	State SIPC
Attorney General	<input type="checkbox"/>	State CERT
Other, please describe:		